



IN THE _____ JUDICIAL CIRCUIT COURT, _____, MISSOURI
Motion for Renewal of Full Order of Child Protection

Use this form when six to ten children are involved with this case. Use CP25 for one child and CP27 for two to five children.

Judge or Division:	Case Number:
	Court ORI Number:
Petitioner:	MSHP Number:
	Responsible Law Enforcement ORI:
	Related Cases:
Protected Child 1: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Respondent's Home Address:
Protected Child 2: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Home Phone Number:
Protected Child 3: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	(Date File Stamp)
Protected Child 4: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Respondent's Work Address:
Protected Child 5: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Work Phone Number:
Protected Child 6: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Work Hours:
Protected Child 7: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child's Relationship to Respondent pursuant to 18 U.S.C. §§ 921(a)(32) and 922(g)(8) determination:
Protected Child 8: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child's Relationship to Respondent (Child 1): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 9: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child's Relationship to Respondent (Child 2): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Protected Child 10: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	Protected Child's Relationship to Respondent (Child 3): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
	Protected Child's Relationship to Respondent (Child 4): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
	Protected Child's Relationship to Respondent (Child 5): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
	Protected Child's Relationship to Respondent (Child 6): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
vs.	Protected Child's Relationship to Respondent (Child 7): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Respondent:	Protected Child's Relationship to Respondent (Child 8): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Alias/Nicknames:	Protected Child's Relationship to Respondent (Child 9): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
Respondent's DOB:	Protected Child's Relationship to Respondent (Child 10): <input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child <input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent <input type="checkbox"/> Other (specify) _____
SSN (if known, last four digits):	

The ☐ Party ☐ Guardian Ad Litem ☐ Court Appointed Special Advocate requests that the court renew the Full Order of Child Protection that was issued against Respondent on _____ (date) and terminates on _____ (date).

- ☐ The expiration of the full order will place the protected child(ren) in an immediate and present danger of domestic violence or stalking.
- ☐ The circumstances forming the basis for the initial order continue to exist.
- ☐ The following incidents of domestic violence or stalking have occurred since the date the petition was filed:
- ☐ Other reasons:

Pursuant to section 455.516, RSMo, the ☐ Party ☐ Guardian Ad Litem ☐ Court Appointed Special Advocate requests that the court renew the Full Order of Child Protection for at least 180 days and not more than one year.

I swear/affirm under penalty of perjury that these facts are true according to my best knowledge and belief.

NOTICE: Section 455.510.3, RSMo provides that a Petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the child on this motion. **Do not provide this information if doing so will endanger the child.**

_____	_____
Date	
_____	_____
Movant's Signature	Attorney's Name, Missouri Bar No., if Applicable
_____	_____
Address (Optional)	Address
_____	_____
City, State and Zip	City, State and Zip
_____	_____
Telephone	Telephone